STATE OF MICHIGAN

NOTICE OF HEARING

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	TERMINATION OF	PARENTAL RIGHTS	
In the matter of			, adoptee
TO:			
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TAKE NOTICE: On	at	m., in the	courtroom,
Building	Street address	City	State
beforeName		tle	a hearing
hearing. If you fail to appear at this he	aring YOUR PARENTA	AL RIGHTS MAY BE TERI	ΛΙΝΔΤΕD
	Ü	Date	
Attorney name	Bar no.		
Attorney name Attorney address	Bar no.	Date	
Attorney address	Bar no.	Date Petitioner name	Telephone no.
	Bar no. Telephone no.	Date Petitioner name Address	
Attorney address City, state, zip	Bar no. Telephone no. PUBLISH ABOVE	Date Petitioner name Address City, state, zip	Telephone no.
Attorney address City, state, zip Complete this portion if this is to be published.	Telephone no. PUBLISH ABOVE	Date Petitioner name Address City, state, zip	Telephone no.
Attorney address City, state, zip Complete this portion if this is to be published. Publish 1 time in	Telephone no. PUBLISH ABOVE	Date Petitioner name Address City, state, zip	Telephone no.

Do not write below this line - For court use only